Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0851-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

10/798,797	1
3/10/04	
Chavez, Albert Max	
coustic Transducer As	sembl)
	•
·	
415.100	,
	3/10/04 Chavez, Albert Max coustic Transducer As

I hereby app	ooint:			······································	
Practiti OR	oners at	Customer Number	30.040		Place Customer Number Bar Code Label here
Name				Registra	tion Number
ļ	· · · · · · ·		····		
ļ					
,					
as my/our attor	mey(s) o a United :	r agent(s) to prosecute the States Patent and Tradema	application ide	ntified above, a	and to transact all
		espondence address for th			
☑ The above	e-mentlo	ned Customer Number.	e above-identiti	led application	to:
OR				F	Place Customer
Practitione OR	ers at Cu	stomer Number			lumber Bar Code abel here
Firm or					
Individual N	ame				
Address					
Address					
City Country			St	ate	Zip
Telephone			7=	- 	
I am the:			Fa	x	
•	ıt/Invento	ν Γ .			
					'
∐∥ Assigned Stateme	e of reco. <i>nt under</i>	rd of the entire interest. See 37 CFR 3.73(b) is enclose	e 37 CFR 3.71.	SBIOE)	
		SIGNATURE of Applica		of Record	
Name		Albert Max Chave	3/		
Signature	Ada	hed [[for []	nuez		
Date NOTE: Size of all		3-25-2004			
NOTE: Signatures of all forms if more than one s	the invent signature is	ors or assignees of record of the required, see below*.	entire interest or th	eir representative	(s) are required. Submit multiple
☐ *Total of		ns are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/81 (06-04)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a collection of infor	mation unless it displays a valid Citib control number.	
Application Number	10/798,797	
Filing Date	3/10/04	
First Named Inventor	CHAVEZ, Albert Max	
Title A	coustic Transducer Ass	embly
Art Unit		-
Examiner Namo		
Attorney Docket Number	415.100	1

		· · · · · · · · · · · · · · · · · · ·						
I hereby ap	point:	· · · · · · · · · · · · · · · · · · ·						
	titioners associated v	vith the Customer Number:	30	,040				
OR								
Pract	Practitioner(s) named below:							
		Name		Registration Number				
as my/our a Trademark	ttomey(s) or agent(s Office connected the) to prosecute the application rewith.	dentified ab	ove, and to trans	sact all busines	s in the United States F	atent and	
T		correspondence address for the			on to:			
OR		ſ						
L T	he address associate	d with Customer Number:						
OR				-1.				
	Firm or Individual Name							
Addn	BSS							
Addn	ess							
City				State		Zip		
Coun								
	phone			Fax	···			
I am the:								
As		ne entire interest. See 37 CFR						
		R 3.73(b) is enclosed. (Form i				M		
Name		r Assignee of Record (if assi	griee, but na	ime, mie and co	mpany name ir	i me "Name" space bel	OW)	
	Richard A. Chavez	11/1/		``)——				
Signature Date	August 27, 2004	VI Helle	wy.		Telephone	(619) 644-1595		
				-1				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
•Tota	l off	orms are submitted.						
		ad by 37 CED 4 21 and 4 22 The						

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.